Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Regina	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture	Kaprolova	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names and any assumed, trade names and doing business as names.		
	Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5755	

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Your Employer Identification Number (EIN), if any.		EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		593 Mayfair Dr South Brooklyn, NY 11234 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Kings County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case number (if	known)	
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Par	Tell the Court About	Your Bank	ruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are			orief description of each go to the top of page 1			42(b) for Individuals Filing for Bai	nkruptcy
	choosing to file under	☐ Chapter 7						
		■ Chapter 11						
		☐ Chapt	er 12					
		☐ Chapt						
		·						
8.	How you will pay the fee	abo ord	ut how yo	ou may pay. Typically, it attorney is submitting y	you are paying the fe	ee yourself, you ma	k's office in your local court for may pay with cash, cashier's check ley may pay with a credit card or	k, or money
				y the fee in installmen ee in Installments (Offici		option, sign and a	ttach the Application for Individua	als to Pay
		but app	is not req	uired to, waive your fee ur family size and you a	e, and may do so only are unable to pay the	if your income is lefee in installments)	re filing for Chapter 7. By law, a j ess than 150% of the official pove . If you choose this option, you m B) and file it with your petition.	erty line that
9.	Have you filed for bankruptcy within the last 8 years?	■ No.						
			District		When		Case number	
			District		When		Casa numbar	
			District		When		Case number	
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			ı	Relationship to you	
			District		When	(Case number, if known	
			Debtor				Relationship to you	
			District		When	(Case number, if known	
11.	Do you rent your residence?	■ No.	Go to I	ine 12.				
	residence:	☐ Yes.	Has yo	our landlord obtained ar	eviction judgment ag	gainst you?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial Sta</i> this bankruptcy petitio		ction Judgment Aga	ninst You (Form 101A) and file it a	as part of

Case	num	ber	(if known
------	-----	-----	-----------

Part	Report About Any Bu	sinesses `	You Owr	n as a Sole Propriet	or	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	e and location of busi	iness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any		
	If you have more than one sole proprietorship, use a		Numb	per, Street, City, State	e & ZIP Code	
	separate sheet and attach it to this petition.		Chec	k the appropriate box	x to describe your business:	
					ess (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				_	efined in 11 U.S.C. § 101(53A))	
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))	
				None of the above		
Pari	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	you are concash-flow § 1116(1) No. No. Yes.	under Surhoosing to stateme (B). I am f Code I am f I do n I am f choos	bchapter V so that it to proceed under Sul nt, and federal incommot filing under Chapter filing under Chapter fot choose to proceed illing under Chapter fee to proceed under the second chapter fee the second chapter fee to proceed under the second chapter fee the second chapter	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or bechapter V, you must attach your most recent balance sheet, statement of operations, he tax return or if any of these documents do not exist, follow the procedure in 11 U.S. ster 11. In the small business debtor according to the definition in the Bankruptcy and a small business debtor according to the definition in the Bankruptcy Code, and under Subchapter V of Chapter 11. In the small business debtor according to the definition in the Bankruptcy Code, and subchapter V of Chapter 11. In the small business debtor according to the Bankruptcy Code, and subchapter V of Chapter 11. In the small business debtor according to the Bankruptcy Code, and subchapter V of Chapter 11.	C. / nd
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own	■ No. □ Yes.	What is	the hazard? diate attention is why is it needed?		
	perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code	
					Tambor, Street, Oily, State & Zip Gode	

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/S/	Regina	Kapro	lova

Regina KaprolovaSignature of Debtor 1

Signature of Debtor 2

Executed on August 6, 2024

MM / DD / YYYY

Executed on MM / DD / YYYY

Case number (if

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Alla Kachan	Date	August 6, 2024
Signature of Attorney for Debtor	_	MM / DD / YYYY
Alla Kachan 4244281 Printed name		
Law Offices Of Alla Kachan, P.C.		
Firm name		
2799 Coney Island Avenue		
Suite 202		
Brooklyn, NY 11235		
Number, Street, City, State & ZIP Code		
Contact phone (718) 513-3145	Email address	alla@kachanlaw.com
4244281 NY		
Bar number & State		

12/15

ation to identify your	case:			
Regina Kaprolova	1			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		F NEW YORK		
			☐ Check if this is an	
			amended filing	
	Regina Kaprolova First Name	First Name Middle Name	Regina Kaprolova First Name Middle Name Last Name First Name Middle Name Last Name	Regina Kaprolova First Name Middle Name Last Name First Name Middle Name Last Name kruptcy Court for the: EASTERN DISTRICT OF NEW YORK Check if this is an

B 104

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

				Unsecured claim
	What	is the nature of the claim?	Credit Card	\$6,846.00
Capital One		die determine Claude eleterite		
Attn: Bankruptcy		the date you file, the claim is: Contingent	Check all that apply	
Po Box 30285	무	Unliquidated		
Salt Lake City, UT 84130		•		
		Disputed		
	-	None of the above apply		
	Does	the creditor have a lien on yo	ur property?	
		No		
Contact		Yes. Total claim (secured an	d unsecured)	
		Value of security:	=	
Contact phone		Unsecured claim		
	What	is the nature of the claim?	Credit Card	\$3,173.00
Capital One				
Attn: Bankruptcy		the date you file, the claim is: Contingent	Check all that apply	
Po Box 30285	무	Unliquidated		
Salt Lake City, UT 84130		•		
	ᆜ	Disputed		
	•	None of the above apply		
	Does	the creditor have a lien on yo	ur property?	
		No		
Contact		Yes. Total claim (secured an	d unsecured)	
		Value of security:	-	

Regina Kaprolova	Case number (if known)					
Contact phone	Unsecured claim					
	What is the nature of the claim?	Charge Account	\$2,089.00			
	As of the date you file the claim	is: Chack all that apply				
		is. Check all that apply				
oan Lake Oity, O1 04130						
	None of the above apply					
	Does the creditor have a lien on y	your property?				
	No					
Contact	Yes. Total claim (secured	and unsecured)				
	Value of security:	, <u>-</u>				
Contact phone	Unsecured claim					
	What is the nature of the claim?	Charge Account	\$3,970.00			
Capital One/SaksFirst						
Attn: Bankruptcy		is: Check all that apply				
Salt Lake City, UT 84130						
	None of the above apply					
	Does the creditor have a lien on y	your property?				
	No					
Contact		and unsecured)				
Ocatest above	_	-				
Contact phone	Unsecured claim					
	What is the nature of the claim?	Credit Card	\$1,452.00			
	As of the date you file the claim	in Charle all that apply				
		is: Check all that apply				
Columbus, On 43216						
	None of the above apply					
		vour proportu?				
	_	your property?				
	_	and unacquired)				
Contact		and unsecured)				
Contact phone						
	Onscoured dam					
	What is the nature of the claim?	Charge Account	\$66.00			
Comenity/Century 21	As of the date were file the eleler	in Charle all that are le				
Attn: Bankruptcy	As of the date you file, the claim	is: Check all that apply				
Attn: Bankruptcy Po Box 182125	Contingent	is: Check all that apply				
Attn: Bankruptcy	ContingentUnliquidated	is: Check all that apply				
Attn: Bankruptcy Po Box 182125	Contingent	is: Check all that apply				
	Contact phone Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Contact Contact Phone Capital One/SaksFirst Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Contact Contact Contact Contact Contact phone Comenity Capital/Sephora Attn: Bankruptcy Po Box 182125 Columbus, OH 43218 Contact Contact	Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Contact Contact phone Capital One As of the date you file, the claim Contact Disputed None of the above apply Does the creditor have a lien on No Contact Contact Po Box 30285 Salt Lake City, UT 84130 Contact Contact Po Box 30285 Salt Lake City, UT 84130 Contact Contact Po Box 30285 Salt Lake City, UT 84130 Contact C	Contact phone Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Contact C			

Debtor 1	Regina Kaprolova	Case number (if known)						
		Does	Does the creditor have a lien on your property?					
		■ No						
	Contact	— п	Yes. Total claim (secured and	d unsecured)				
		_	Value of security:	, <u> </u>				
	Contact phone		Unsecured claim					
7		What	is the nature of the claim?	Charge Account	\$474.00			
	Dsnb Bloomingdales				• • • • • • • • • • • • • • • • • • • 			
	Attn: Bankruptcy	As of	the date you file, the claim is:	Check all that apply				
	Po Box 8053		Contingent					
	Mason, OH 45040		Unliquidated					
			Disputed					
			None of the above apply					
		Does	the creditor have a lien on you	ur property?				
	Contact	_ 🖥	No Yes. Total claim (secured and	d unsecured)				
	Contact		Value of security:					
	Contact phone		Unsecured claim					
8		What	is the nature of the claim?	Contested Judgement	\$776,675.00			
J	Moysha Burekhovitch				\(\frac{\pi}{2}\) \(\frac{\pi}{2}\) \(\pi			
	1543 E17th	As of	the date you file, the claim is:	Check all that apply				
	Brooklyn, NY 11230		Contingent					
	• ,		Unliquidated					
			Disputed					
			None of the above apply					
		Does	the creditor have a lien on you	ur property?				
			No					
	Contact		Yes. Total claim (secured and	d unsecured)				
			Value of security:	·				
	Contact phone		Unsecured claim					
9		What	is the nature of the claim?	Credit Card	\$9,314.00			
	Syncb/Care Credit							
	Attn: Bankruptcy		the date you file, the claim is:	Check all that apply				
	Po Box 965060		Contingent					
	Orlando, FL 32896		Unliquidated					
			Disputed					
			None of the above apply					
		_	the creditor have a lien on you	ur property?				
			No					
	Contact		Yes. Total claim (secured and	d unsecured)				
			Value of security:	-				
	Contact phone		Unsecured claim					
10		What	is the nature of the claim?	Charge Account	\$1,872.00			
	Synchrony Bank/PC Richard				- -			
	Attn: Bankruptcy							

Debtor 1	Regina Kaprolova		Case nu	mber (if known)	
	Po Box 965060 Orlando, FL 32896	As of t	the date you file, the claim is: Contingent	Check all that apply	
	Onando, 1 L 32030	ä	Unliquidated		
		_	Disputed		
			None of the above apply		
-		Does t	the creditor have a lien on you	ur property?	
			No		
-	Contact		Yes. Total claim (secured and	d unsecured)	
-			Value of security:	-	
	Contact phone		Unsecured claim		
11	Synchrony Bank/TJX	What i	is the nature of the claim?	Charge Account	\$1,298.00
	Attn: Bankruptcy	As of	the date you file, the claim is:	Check all that apply	
	Po Box 965060		Contingent		
	Orlando, FL 32896		Unliquidated		
			Disputed		
			None of the above apply		
-		Does	the creditor have a lien on you	ur property?	
			No		
	Contact		Yes. Total claim (secured and	d unsecured)	
=		<u></u>	Value of security:	-	
	Contact phone		Unsecured claim		
12	Synchrony Bank/T IV	What i	is the nature of the claim?	Credit Card	\$4,734.00
	Synchrony Bank/TJX Attn: Bankruptcy	As of	the date you file, the claim is:	Check all that apply	
	Po Box 965060		Contingent		
	Orlando, FL 32896		Unliquidated		
			Disputed		
			None of the above apply		
-		Does	the creditor have a lien on you	ur property?	
			No		
-	Contact		Yes. Total claim (secured and	d unsecured)	
-			Value of security:	-	
	Contact phone		Unsecured claim		
13		What i	is the nature of the claim?	Credit Card	\$20,919.00
	TD Bank, N.A.				
	Attn: Bankruptcy	As of t □	the date you file, the claim is: Contingent	Check all that apply	
	1701 Rt 70 East Cherry Hill, NJ 08003		Unliquidated		
	Cherry Hill, NJ 08003	ä	Disputed		
		_	None of the above apply		
		Does t	the creditor have a lien on you	ur property?	
			No		
-	Contact		Yes. Total claim (secured and	d unsecured)	
			Value of security:		

Debtor 1	Regina Kaprolova		Case no	umber (if known)	
	Contact phone		Unsecured claim		
14		What	is the nature of the claim?	Car Lease	\$1,438.00
	Toyota Motor Credit	A = -(dha data was Clarida a latar ta	Object and the standard	
		As of	the date you file, the claim is: Contingent	: Check all that apply	
			Unliquidated		
		H	Disputed		
			None of the above apply		
		-	None of the above apply		
		Does	the creditor have a lien on yo	ur property?	
			•		
			No	.1	
	Contact		Yes. Total claim (secured an	a unsecurea)	
	Contact phone		Value of security: Unsecured claim		
	Contact phone		Unsecured ciaim		
Part 2:	Sign Below				
rait Z.	Sigil Below				
Under p	enalty of perjury, I declare that the	information	provided in this form is true a	nd correct.	
V 1-1	Daning Kannalaya		X		
	Regina Kaprolova			obtor 2	
	gina Kaprolova nature of Debtor 1		Signature of D	ebioi 2	
Sig	nataro di Dobitor i				
D	. A		Doto		
Dat	e August 6, 2024	<u>—</u>	Date		

						8/06/24 4:46PM
Fill	in this inform	ation to identify your	case:			
Deb	tor 1	Regina Kaprolov				
Dob	tor 2	First Name	Middle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ban	kruptcy Court for the:	EASTERN DISTRICT C	OF NEW YORK		
(if kno	e number				☐ Check	t if this is an
					amen	ded filing
Off	icial For	m 106Sum				
			and Liabilities ar	nd Certain Statistical Information		12/15
				are filing together, both are equally responsible for		
				ne information on this form. If you are filing amend k the box at the top of this page.	ed schedu	les after you file
		•	new Summary and check	tille box at tile top of tills page.		
Part	1: Summa	rize Your Assets				
					Your a	
					Value o	of what you own
1.	Schedule A/	B: Property (Official F	from Schedule A/B		\$	923,000.00
					· · · · · · · · · · · · · · · · · · ·	
	1b. Copy line	e 62, Total personal pro	operty, from Schedule A/B		\$	69,189.26
	1c. Copy line	63, Total of all proper	ty on Schedule A/B		\$	992,189.26
Part	2: Summa	rize Your Liabilities				
						abilities t you owe
2.	Schedule D	Creditors Who Have C	Claims Secured by Property	(Official Form 106D)		
				the bottom of the last page of Part 1 of Schedule D	\$	150,976.00
3.	Schedule E/F	F: Creditors Who Have	Unsecured Claims (Officia	ıl Form 106E/F)		
	3a. Copy the	total claims from Part	1 (priority unsecured claim	ns) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured c	elaims) from line 6j of Schedule E/F	\$	834,320.00
				Your total liabilities	\$	985,296.00
Part	3: Summa	rize Your Income and	d Expenses			
4.	Schedule I: Y	Your Income (Official F	orm 106I)			
				e I	\$	10,140.00
5.		Your Expenses (Officia	,		•	6 675 00
	Copy your me	onthly expenses from I	line 22c of Schedule J		\$	6,675.00
Part	4: Answer	These Questions for	r Administrative and Stati	istical Records		
6.	Are you filin	g for bankruptcy und	ler Chapters 7, 11, or 13?			
	☐ No. You	have nothing to repor	t on this part of the form. C	heck this box and submit this form to the court with yo	ur other sch	nedules.
	Yes					
7.		f debt do you have?				
	■ Your do	ahte are primarily cor	sumer debte Consumer	debts are those "incurred by an individual primarily for	a nerconol	family or
				og for statistical purposes. 28 U.S.C. § 159.	a personal,	iaiilliy, Ui
		ebts are not primarily rt with your other scheo		ve nothing to report on this part of the form. Check this	s box and s	ubmit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

								8/06/24 4:46PI
Fill	in this informa	tion to identify	your case and th	is filin	g:			
Deb	otor 1	Regina Kapı	rolova					
		First Name		Name	Last Name			
	otor 2 use, if filing)	First Name	Middle	Name	Last Name			
Llni	tad States Rank	runtey Court for	the EASTERN	DISTR	CT OF NEW YORK			
Oili	ica Glaics Bank	ruptcy Court for	LAGILIAN	DIOTIC	OT OF NEW YORK			
Cas	se number							☐ Check if this is an amended filing
Of .	<u>ficial Forr</u>	n 106A/E	<u> </u>					
Sc	chedule	A/B: Pi	roperty					12/15
1. D		e any legal or ec			Estate You Own or Have an Interest In			
1.1				Wha	t is the property? Check all that apply			
	593 Mayfair	Dr South vailable, or other des	scription		Single-family home			nims or exemptions. Put d claims on Schedule D:
	on oor address, ii a	valiable, or early acc			Duplex or multi-unit building	Creditors Who Have Claims Secured by		
					Condominium or cooperative			
	5	ND/	44004 0000		Manufactured or mobile home	Current val		Current value of the
	Brooklyn	NY State	11234-0000 ZIP Code			entire prop	-	portion you own? \$923,000.00
	City	State	ZIF Code				3,000.00	
					Other			our ownership interest ancy by the entireties, or
				Who	has an interest in the property? Check one	a life estate	e), if known.	
	Vingo			_	Debtor 1 only			
	Kings County							
	County				200101 1 4114 200101 2 0111)		if this is com	munity property
				Othe	r information you wish to add about this item erty identification number:		,	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Deb	tor 1 R	egina Kapr	olova		Case number (if known)	
3. C	ars, vans,	trucks, tract	tors, sport utility vel	hicles, motorcycles		
	No					
	Yes					
3.1	Make:	Lexus		Who has an interest in the property? Check one		eured claims or exemptions. Put secured claims on Schedule D:
	Model:	NX 300		Debtor 1 only		ve Claims Secured by Property.
	Year:	2021		Debtor 2 only	Current value of	the Current value of the
		nate mileage:	19800	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Lease	formation:		At least one of the debtors and another		
	Lease	u Cai		☐ Check if this is community property	\$0	0.00 \$0.00
				(see instructions)		
Ex □	namples: B	oats, trailers,	motors, personal wa	d other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcycon for all of your entries from Part 2, including that number here	ele accessories	\$0.00
.p	ages you	nave attache	ed for Part 2. Write t	tnat number nere	=>	
Part	3: Descri	be Your Perso	nal and Household Ite	ems		
Doy	ou own o	or have any l	egal or equitable int	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E		,	urnishings ces, furniture, linens,	, china, kitchenware		
			Furniture			\$500.00
E		Televisions a including cell	nd radios; audio, vide phones, cameras, m	eo, stereo, and digital equipment; computers, pr nedia players, games	inters, scanners; music c	ollections; electronic devices \$1,000.00
E	xamples:	other collection	figurines; paintings, pons, memorabilia, col	prints, or other artwork; books, pictures, or other llectibles	r art objects; stamp, coin,	or baseball card collections;
E □	No Yes. De	musical instru	graphic, exercise, an	d other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes	and kayaks; carpentry tools;
-	Firearms Examples	: Pistols, rifles	s. shotguns, ammunit	tion, and related equipment		

Official Form 106A/B Schedule A/B: Property page 2

■ No

8/06/24 4:46PM

Debtor 1	Regina Kaprolova		Case number (if kr	nown)
☐ Yes.	. Describe			
11. Cloth e				
Exam □ No	nples: Everyday clothes, fu	ırs, leather coats, desi	gner wear, shoes, accessories	
	. Describe			
100.				
	Cloth	es		\$200.00
□ No			gement rings, wedding rings, heirloom jewelry, watches, ge	ems, gold, silver
Exam □ No	arm animals nples: Dogs, cats, birds, ho Describe	orses		
	0-1			Unknown
	Cat			Unknown
			art 3, including any entries for pages you have attache	d \$2,200.00
Part 4: De	escribe Your Financial Asse	ets		
Do you o	wn or have any legal or o	equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	nples: Money you have in y		me, in a safe deposit box, and on hand when you file your	petition
			Cash	\$40.00
			- Cusii	
Exam			unts; certificates of deposit; shares in credit unions, broke with the same institution, list each.	rage houses, and other similar
□ No ■ Yes.			Institution name:	
	17.1.	Checking	TD Bank Checking account ending 2914	\$5,400.00
	17.2.	Checking	Checking JP Morgan Chase Bank ending i 6145	n \$5,170.73

8/06/24 4:46PM

Debtor 1	Regina Kaprolova		Case number (if known)	0/00/24 4.4011
	17.3	. Savings	JP Morgan Chase Savings Bank account	\$10,015.25
	17.4	. Checking	Capital One Checking Back Account ending in 5841	\$38,738.92
Exan	s, mutual funds, or publ		okerage firms, money market accounts	
■ No □ Yes	i	Institution or issuer	name:	
	oublicly traded stock and venture	d interests in incorp	orated and unincorporated businesses, including an interest in an L	.LC, partnership, and
	s. Give specific information	n about themame of entity:	 % of ownership:	
Nego	otiable instruments include	personal checks, ca	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	s. Give specific information	n about them suer name:		
	ement or pension account pples: Interests in IRA, ER		403(b), thrift savings accounts, or other pension or profit-sharing plans	
	s. List each account separa Type	ately. e of account:	Institution name:	
	IRA		IRA account	\$7,624.36
Your		sits you have made s	o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or o	thers
	i		Institution name or individual:	
23. Annu I No	ities (A contract for a peri	odic payment of mon	ey to you, either for life or for a number of years)	
☐ Yes	lssuer na	me and description.		
	sts in an education IRA, S.C. §§ 530(b)(1), 529A(b)		qualified ABLE program, or under a qualified state tuition program.	
	Institution	name and description	n. Separately file the records of any interests.11 U.S.C. § 521(c):	
25. Trust ■ No	s, equitable or future int	erests in property (other than anything listed in line 1), and rights or powers exercisable	for your benefit
☐ Yes	s. Give specific information	n about them		
			nd other intellectual property eds from royalties and licensing agreements	
☐ Yes	. Give specific information	n about them		
	ses, franchises, and oth nples: Building permits, ex		les perative association holdings, liquor licenses, professional licenses	

 $\hfill \square$ Yes. Give specific information about them...

Debto	1 Regina Kaprolova	Case number (if known)	8/06/24 4:46
Mone	y or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	x refunds owed to you		
■ 1	No Yes. Give specific information about them, including whether you already fi	led the returns and the tax years	
	mily support kamples: Past due or lump sum alimony, spousal support, child support, m	aintenance, divorce settlement, property set	tlement
-	Yes. Give specific information		
	her amounts someone owes you xamples: Unpaid wages, disability insurance payments, disability benefits, benefits; unpaid loans you made to someone else	sick pay, vacation pay, workers' compensat	tion, Social Security
	Yes. Give specific information		
_E;	erests in insurance policies xamples: Health, disability, or life insurance; health savings account (HSA)	; credit, homeowner's, or renter's insurance	
■	No Yes. Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
lf :	y interest in property that is due you from someone who has died you are the beneficiary of a living trust, expect proceeds from a life insurant meone has died.	ce policy, or are currently entitled to receive	property because
	es. Give specific information		
	aims against third parties, whether or not you have filed a lawsuit or researches: Accidents, employment disputes, insurance claims, or rights to su		
	Yes. Describe each claim		
34. Ot l	her contingent and unliquidated claims of every nature, including cou No	ınterclaims of the debtor and rights to se	t off claims
	Yes. Describe each claim		
I			
⊔,	es. Give specific information		
	add the dollar value of all of your entries from Part 4, including any en or Part 4. Write that number here		\$66,989.26
Part 5:	Describe Any Business-Related Property You Own or Have an Interest In. Lis	t any real estate in Part 1.	
	- you own or have any legal or equitable interest in any business-related propert o. Go to Part 6.	y?	

Official Form 106A/B Schedule A/B: Property page 5

 \square Yes. Go to line 38.

8/06/24 4:46PM

Deb	tor 1	Regina Kaprolova		Case number (if known)	6/U6/24 4.46PM
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. [Do you	own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	■ No.	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
		have other property of any kind you did not already list	?		
		oles: Season tickets, country club membership			
	No				
	res.	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
•		······································			40.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$923,000.00
56.	Part 2	2: Total vehicles, line 5	\$0.00		
57.	Part 3	: Total personal and household items, line 15	\$2,200.00		
58.	Part 4	: Total financial assets, line 36	\$66,989.26		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$69,189.26	Copy personal property total	\$69,189.26
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$992,189.26

Official Form 106A/B Schedule A/B: Property page 6

Fill in this inform	nation to identify your	case:		
Debtor 1	Regina Kaprolova	3		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F NEW YORK	
Case number				
(if known)				☐ Check if this is an amended filing
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
593 Mayfair Dr South Brooklyn, NY 11234 Kings County	\$923,000.00		\$179,975.00	NYCPLR § 5206
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
Furniture Line from Schedule A/B: 6.1	\$500.00		\$500.00	NYCPLR § 5205(a)(5)
Line from Schedule A/B. G. 1			100% of fair market value, up to any applicable statutory limit	
Electronics Line from Schedule A/B: 7.1	\$1,000.00		\$1,000.00	NYCPLR § 5205(a)(5)
Line Iron Scredule A.B. 1.1			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$200.00		\$200.00	NYCPLR § 5205(a)(5)
Line Iron Scredule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
Necklace Line from Schedule A/B: 12.1	\$500.00		\$500.00	NYCPLR § 5205(a)(6)
LINE HOIN SCHEUUIE AVD. 12.1			100% of fair market value, up to	

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Checking: TD Bank Checking account ending 2914	\$5,400.00		\$1,175.00	NYCPLR § 5205(a)(9)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Checking JP Morgan Chase Bank ending in 6145	\$5,170.73		\$0.00	NYCPLR § 5205(a)(9)
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Savings: JP Morgan Chase Savings Bank account	\$10,015.25		\$0.00	NYCPLR § 5205(a)(9)
	Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
	Checking: Capital One Checking Back Account ending in 5841	\$38,738.92		\$0.00	NYCPLR § 5205(a)(9)
	Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
	IRA: IRA account Line from Schedule A/B: 21.1	\$7,624.36		\$7,624.36	NYCPLR § 5205(e)
	Line Holli Galledale A.D. 21.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/25 and every			led on or after the date of adjustme	nt.)
	■ No				
	☐ Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

Case number (if known)

Debtor 1 Regina Kaprolova

					8/06/24 4:46PN
Fill in this information	to identify you	r case:			
Debtor 1 Re	egina Kaprolov	va			
110	t Name	Middle Name Last Name			
Debtor 2	4 Nama	Middle Nome			
(Spouse if, filing) Firs	t Name	Middle Name Last Name			
United States Bankrupt	cy Court for the:	EASTERN DISTRICT OF NEW YORK			
Case number (if known)					if this is an ded filing
Official Form 10	6D				
		Who Have Claims Secure	ed by Property	y	12/15
		f two married people are filing together, both are out, number the entries, and attach it to this form.			
1. Do any creditors have o	claims secured by	your property?			
☐ No. Check this b	oox and submit th	nis form to the court with your other schedules.	You have nothing else to	o report on this form.	
Yes. Fill in all of	the information b	pelow.			
Part 1: List All Sec	ured Claims				
for each claim. If more that	an one creditor has	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As all order according to the creditor's name.		Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Chase Mortgag	ge	Describe the property that secures the claim:	\$150,976.00	\$923,000.00	\$0.00
Creditor's Name Attn: Legal Corresponden 700 Kansas Ln La4-7200	Mail Code	593 Mayfair Dr South Brooklyn, NY 11234 Kings County As of the date you file, the claim is: Check all that apply. □ Contingent			
Monroe, LA 71 Number, Street, City, S		☐ Unliquidated			
Who owes the debt? C		☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only		☐ An agreement you made (such as mortgage or scar loan)	secured		
Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the deb		Judgment lien from a lawsuit			
☐ Check if this claim re community debt	lates to a	Other (including a right to offset) Mortgage)		
Date debt was incurred	Opened 04/12 Last Active 07/24	Last 4 digits of account number 1498	3		
			A.B.C. C.	20.00	
	of your form, add t	olumn A on this page. Write that number here: the dollar value totals from all pages.	\$150,97 \$150,97		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			8/06/24 4:46PM				
Fill in this information to identify your case:							
Debtor 1 Regina Kaprolova							
rtogina rtapiolova	dle Name Last Name						
Debtor 2							
(Spouse if, filing) First Name Midd	dle Name Last Name						
United States Bankruptcy Court for the: EASTER	RN DISTRICT OF NEW YORK						
Coop washer							
Case number (if known)			Check if this is an				
			amended filing				
			-				
Official Form 106E/F			_				
Schedule E/F: Creditors Who Ha	ve Unsecured Claims		12/15				
any executory contracts or unexpired leases that could Schedule G: Executory Contracts and Unexpired Lease: Schedule D: Creditors Who Have Claims Secured by Pro left. Attach the Continuation Page to this page. If you ha name and case number (if known). Part 1: List All of Your PRIORITY Unsecured (s (Official Form 106G). Do not includ operty. If more space is needed, copy ove no information to report in a Part	e any creditors with partially secured clair the Part you need, fill it out, number the	ns that are listed in entries in the boxes on the				
Do any creditors have priority unsecured claims ag							
■ No. Go to Part 2.	•						
☐ Yes.							
163.							
Part 2: List All of Your NONPRIORITY Unsecu	red Claims						
3. Do any creditors have nonpriority unsecured claim	s against you?						
☐ No. You have nothing to report in this part. Submit	this form to the court with your other scl	nedules.					
Yes.							
 List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. 	aim. For each claim listed, identify what	type of claim it is. Do not list claims already	included in Part 1. If more				
			Total claim				
4.1 Capital One	Last 4 digits of account number	8505	\$6,846.00				
Nonpriority Creditor's Name	_						
Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 02/06 Last Active 7/09/24					
Salt Lake City, UT 84130	mon was the asst meaned.	1703/24					
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply					
Who incurred the debt? Check one.							
Debtor 1 only	☐ Contingent						
☐ Debtor 2 only ☐ Unliquidated							
☐ Debtor 1 and Debtor 2 only ☐ Disputed							
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:					
☐ Check if this claim is for a community	Student loans						
debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	paration agreement or divorce that you did no	t				
■ No	Debts to pension or profit-shar	ing plans, and other similar debts					
☐ Yes	■ Other. Specify Credit Car	d					
			<u> </u>				

Debtor 1 Regina Kaprolova Case number (if known) \$3,173.00 4.2 **Capital One** Last 4 digits of account number 3674 Nonpriority Creditor's Name Attn: Bankruptcy Opened 07/15 Last Active Po Box 30285 When was the debt incurred? 7/08/24 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 **Capital One** Last 4 digits of account number 4683 \$2,089.00 Nonpriority Creditor's Name Attn: Bankruptcv Opened 07/18 Last Active Po Box 30285 When was the debt incurred? 07/24 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Charge Account** Other. Specify Capital One/SaksFirst 4.4 Last 4 digits of account number 0784 \$3,970.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 10/20 Last Active Po Box 30285 When was the debt incurred? 7/11/24 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

8/06/24 4:46PM Case number (if known) Debtor 1 Regina Kaprolova \$1,452.00 4.5 Comenity Capital/Sephora Last 4 digits of account number 5287 Nonpriority Creditor's Name Attn: Bankruptcy Opened 07/22 Last Active Po Box 182125 When was the debt incurred? 07/24 Columbus, OH 43218 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: $\hfill \square$ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.6 Comenity/Century 21 Last 4 digits of account number 7563 \$66.00 Nonpriority Creditor's Name Attn: Bankruptcv Opened 11/08/16 Last Active Po Box 182125 When was the debt incurred? 08/24 Columbus, OH 43218 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Charge Account** Other. Specify 4.7 **Dsnb Bloomingdales** Last 4 digits of account number 0208 \$474.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 10/23 Last Active Po Box 8053 When was the debt incurred? 07/24 Mason, OH 45040 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans

debt

■ No

☐ Yes

☐ Check if this claim is for a community

Is the claim subject to offset?

■ Other. Specify Charge Account

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Debtor	1 Regina Kaprolova	Case number (if known)				
4.8	Moysha Burekhovitch Nonpriority Creditor's Name	Last 4 digits of account number		\$776,675.00		
	1543 E17th	When was the debt incurred?				
	Brooklyn, NY 11230					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	_	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only					
	Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Contested				
4.9	Syncb/Care Credit	Last 4 digits of account number	8602	\$9,314.00		
	Nonpriority Creditor's Name			40,01 1100		
	Attn: Bankruptcy		Opened 06/21 Last Active			
	Po Box 965060	When was the debt incurred?	7/11/24			
	Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	•	,			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	·			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	l			
4.1	Synchrony Bank/PC Richard	Last 4 digits of account number	7448	\$1,872.00		
	Nonpriority Creditor's Name	_		·		
	Attn: Bankruptcy	When we do	Opened 05/10 Last Active			
	Po Box 965060 Orlando, FL 32896	When was the debt incurred?	07/24			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only ☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other Specify Charge Acc	count			

8/06/24 4:46PM Debtor 1 Regina Kaprolova Case number (if known) 4.1 Synchrony Bank/TJX 1595 \$4,734.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 02/17 Last Active Po Box 965060 When was the debt incurred? 07/24 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 Synchrony Bank/TJX 0278 \$1,298.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 09/16 Last Active Po Box 965060 When was the debt incurred? 7/03/24 Orlando, FL 32896 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.1 TD Bank, N.A. 8176 \$20,919.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 03/14 Last Active Attn: Bankruptcy 1701 Rt 70 East When was the debt incurred? 7/04/24 Cherry Hill, NJ 08003 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No

☐ Yes

☐ Check if this claim is for a community

Is the claim subject to offset?

■ Other. Specify Credit Card

☐ Obligations arising out of a separation agreement or divorce that you did not

lacksquare Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

Add the Amounts for Each Type of Unsecured Claim

1360 Dickerson Road

Teaneck, NJ 07666

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Part 2: Creditors with Nonpriority Unsecured Claims

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
		- · · · ·	•		Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	Ψ	0.00
	OI.	here.	OI.	\$	834,320.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	834,320.00

Last 4 digits of account number

Fill in this information to identify your case:						
Regina Kaprolova	1					
First Name	Middle Name	Last Name				
First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK						
			l c	Check if this is an		
				amended filing		
	Regina Kaprolova First Name	Regina Kaprolova First Name Middle Name First Name Middle Name	Regina Kaprolova First Name Middle Name Last Name First Name Middle Name Last Name	Regina Kaprolova First Name Middle Name Last Name First Name Middle Name Last Name		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

1 Lexus Financial Services P.O. Box 8026 Cedar Rapids, IA 52408-8026 Auto lease for car 2021 Lexus NX300

8/06/24 4:46PM

					0/00/24 4.4011
Fill in thi	s information to identify your	case:			
Debtor 1	Regina Kaprolov	a			
	First Name	Middle Name	Last Name		
Debtor 2	ling) First Name	Middle None	Lost Nome		
(Spouse if, fi	ing) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK		
Case nun	nhar				
(if known)					Check if this is an
					amended filing
O((; - ; -	.l				
	al Form 106H				
Sched	dule H: Your Cod	lebtors			12/15
ill it out,		boxes on the left. Attach	the Additional Page t	tion. If more space is needed, to this page. On the top of any	
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No	1				
□ Ye					
				ry? (Community property states	and territories include
Alizo	na, California, Idaho, Louisiana	i, Nevada, New Mexico, Pu	ierio Rico, Texas, wash	ington, and wisconsin.)	
■ No	o. Go to line 3.				
☐ Ye	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in lin Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	r if your spouse is filing with youre you have listed the credit 16G). Use Schedule D, Schedu	or on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to Check all schedules that ap	
24				Cohodula D. Saa	
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line	
				☐ Schedule G, line	
				— Ochedule 6, line	
	Number Street City	State	ZIP Code		
	Oily	olato	211 0000		
3.2				☐ Schedule D, line	
J.Z	Name			☐ Schedule D, line	
				☐ Schedule G, line	
	Number Street			☐ Schedule G, line —	
	Number Street City	State	ZIP Code	☐ Schedule G, line	

Fill in this informa	ation to identify your case:	
Debtor 1	Regina Kaprolova	
Debtor 2 (Spouse, if filing)		
United States Bar	nkruptcy Court for the: EASTERN DISTRICT OF NEW YORK	
Case number (If known)		Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Fo	orm 106I	13 income as of the following date: MM / DD/ YYYY
Schedule	e I: Your Income	12/15
•	and accurate as possible. If two married people are filing together (De ct information. If you are married and not filing jointly, and your spous	,, , , ,

spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with information about additional employers.	Francisco estatua	■ Employed	☐ Employed
		Employment status	☐ Not employed	☐ Not employed
		Occupation	Pharmacist	
	Include part-time, seasonal, or self-employed work.	Employer's name	Cityline Pharmacy Corporation	
	Occupation may include student or homemaker, if it applies.	Employer's address	511 Cortelyou Rd Brooklyn, NY 11218	
		How long employed th	ere? <u>3 years</u>	
Par	Give Details About Mon	thly Income		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be.

- Estimate and list monthly overtime pay.
- Calculate gross Income. Add line 2 + line 3.

			non-filir	ng spouse
2.	\$	10,140.00	\$	N/A
3.	+\$_	0.00	+\$	N/A
4.	\$	10,140.00	\$	N/A

For Debtor 2 or

For Debtor 1

For Debtor 1	Debt	tor 1	Regina Kaprolova	_		Case	number (<i>if ki</i>	nown)				
Copy line 4 here 4. \$ 10,140.00 \$ N/A 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$ 0.00 \$ N/A 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 \$ N/A 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ N/A 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ N/A 5e. Insurance 5e. \$ 0.00 \$ N/A 5f. Domestic support obligations 5f. \$ 0.00 \$ N/A 5g. Union dues 5f. \$ 0.00 \$ N/A 5h. Other deductions. Specify: 5f. \$ 0.00 \$ N/A 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 10,140.00 \$ N/A 8a. Net income regularly received: 8a. Net income regularly received: 8a. Net income from rental property and business showing gross profession, or farm Attach a statement for each property and business showing gross profession, or farm Attach a statement for each property and business showing gross profession, or farm Attach a statement for each property and business showing gross profession, or farm Attach a statement for each property and business showing gross profession, or farm Attach a statement for each property and business showing gross profession, or farm Attach a statement for each property and business showing gross profession, or farm Attach a statement for each property and business showing gross profession, or farm Attach a statement for each property and business showing gross expenses, and the total monthly net income. 8a. \$ 0.00 \$ N/A 8b. \$ 0.00 \$ N/A 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						For	Debtor 1					9
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Soc. \$ 0.00 \$ N/A 5e. Insurance 5e. Insurance 5f. Domestic support obligations 5f. \$ 0.00 \$ N/A 5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 5h. Other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly tencome. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receivee lnclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8d. Unemployment compensation		Cop	y line 4 here	4.		\$	10,140	0.00			•	
5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Soc. \$ 0.00 \$ N/A 5e. Insurance 5e. Insurance 5f. Domestic support obligations 5f. \$ 0.00 \$ N/A 5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 5h. Other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly tencome. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receivee lnclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8d. Unemployment compensation	5	l iet	all navroll deductions:									
5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. S. 0.00 \$ N/A 5e. Insurance 5f. Domestic support obligations 5f. \$ 0.00 \$ N/A 5g. Union dues 5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 10,140.00 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A	0.			52	a	\$.		\$	N/	'Δ
5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. Solution and the payments of retirement fund loans 5d. Solution and the payments of retirement fund loans 5d. Solution and the payments of retirement fund loans 5d. Solution and the payments of retirement fund loans 5d. Solution and the payments of retirement fund loans 5d. Solution and the payments of retirement fund loans 5d. Solution and the payments of retirement fund loans 5d. Solution and the payments of retirement fund loans 5d. Solution and the payments of retirement fund loans 5d. Solution and the payments of retirement fund loans 5d. Solution and the payments of retirement fund loans 5d. Solution and the payments that you, a non-filing spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 5d. Solution and payments payments that you, a non-filing spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Unemployment compensation			· · · · · · · · · · · · · · · · · · ·						_			
5e. Insurance 5f. Domestic support obligations 5f. Domestic support obligations 5f. Solution dues 5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6c. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6d. Solution des Solu			·			· —			_	·		
5f. Domestic support obligations 5g. Union dues 5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8a. Net income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A		5d.	Required repayments of retirement fund loans	50	d.	\$	(0.00	- :	\$	N/	'A
5g. Union dues 5h. Other deductions. Specify: 5h. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 0.00 \$ N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 10,140.00 \$ N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A N/A N/A N/A N/A							(0.00	_	·	N/	Ά
5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation						· · —			_	·		
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8a. Net income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A	6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.			· —			_	·		
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monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. \$ 0.00 \$ N/A 8d. \$ 0.00 \$ N/A	8.		Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross									
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regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A		8b.	•	8b).	\$			_			
settlement, and property settlement. 8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A		8c.	regularly receive						_			
1471				80) .	\$	(0.00	_ :	\$	N/	<u>'A</u>
8e. Social Security 8e. \$ 0.00 \$ N/A									_	·		
· · _ · · · · · · _ · _ · _ · _ · _ · _ ·			•	8e	€.	\$		0.00	_ :	\$	N/	<u>'A</u>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ N/A		81.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.			\$		0.00	, ;	\$	N/	' A
8g. Pension or retirement income 8g. \$ 0.00 \$ N/A		8g.	· · ·						_			
8h. Other monthly income. Specify: 8h.+ \$ 0.00 + \$ N/A		8h.	Other monthly income. Specify:	_ 8h	1.+	\$		0.00	+ :	\$	N/	Ά
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	(0.00		\$	N	I/A
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.		•	10.	\$_	10	0,140.00	+ 5		N/A	= \$	10,140.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.6	11.	Incli othe Do i	ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not	depe			•			in Schedule		0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined	12.	Writ	e that amount on the Summary of Schedules and Statistical Summary of Certa							it	\$	10,140.00
13. Do you expect an increase or decrease within the year after you file this form? No.	13.	Do :	•	?								
☐ Yes. Explain:			Yes. Explain:									

						ı							
Fill	in this informa	tion to identify yo	our case:										
Deb	Regina Kaprolova						Check if this is: An amended filing						
Deb	tor 2							showing postpetition cha	apter				
(Spo	ouse, if filing)					_		s of the following date:					
Unit	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF NEW Y	ORK		MM / DD / YYY	Υ					
Cas	e number												
(If kı	nown)												
Of	fficial Fo	rm 106J											
Sc	chedule	J: Your	Exper	ises					12/15				
Be info nur	as complete a ormation. If m mber (if know	and accurate as ore space is ne n). Answer ever	possible eded, atta ry questio	. If two married people ar ich another sheet to this									
Par 1.	t 1: Descr Is this a join	ibe Your House	hold										
١.	_												
	■ No. Go to			ata hayaahald?									
	_		ın a separ	ate household?									
	□ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.						
2.	Do you have	e dependents?	■ No										
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	I				
	Do not state	the						□ No					
	dependents	names.						Pes					
								□ No					
								□ No					
								□ No □ Yes					
3.	expenses of	penses include f people other t	han $_{oxdotsim}$	No Yes				Lifes					
	yourself and	d your depende	nts? —	100									
Est exp	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp									
арр	ilicable date.												
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i>)			Your e	expenses					
,		,											
4.		or home owners		ses for your residence. I or lot.	nclude first mortgage	e 4.	\$	2,100.00					
	If not includ	led in line 4:											
	4a. Real e	estate taxes				4a.	\$	0.00					
		rty, homeowner's				4b.	\$	0.00					
				upkeep expenses		4c.		300.00					
5		owner's associat			mo oquity loons	4d.	· -	0.00					
5.	Auditional	nortyaye payme	ento for yo	our residence, such as ho	me equity loans	5.	φ	0.00					

Debtor 1	Regina k	Caprolova	Case num	nber (if known)	
1 14!!	lition				
5. Util 6a.	lities: Electricity.	heat, natural gas	6a.	\$	500.00
6b.		wer, garbage collection	6b.	·	400.00
6c.		e, cell phone, Internet, satellite, and cable services	6c.	· · · · · · · · · · · · · · · · · · ·	200.00
6d.	•		6d.	•	0.00
		ekeeping supplies	od. 7.	·	
		children's education costs	8.	·	1,000.00 0.00
_		ry, and dry cleaning	9.		
	-		10.	·	300.00
	•	oroducts and services		·	200.00
		ntal expenses	11.	\$	0.00
	nsportation.	Include gas, maintenance, bus or train fare.	12.	\$	200.00
		ar payments. clubs, recreation, newspapers, magazines, and book			0.00
		ributions and religious donations	14.	·	0.00
	urance.	ributions and religious donations	14.	Ψ	0.00
		surance deducted from your pay or included in lines 4 or	20		
	a. Life insura	, , ,	15a.	\$	0.00
	. Health ins		15b.	· · ————	400.00
	c. Vehicle in:		15c.	·	300.00
			15d.	·	
		rrance. Specify:		Φ	0.00
	es. Do not in	clude taxes deducted from your pay or included in lines	i or 20. 16.	\$	0.00
•	·	ease payments:		Ψ	0.00
		ease payments: ents for Vehicle 1	17a.	\$	475.00
		ents for Vehicle 2	17b.	·	0.00
			176. 17c.	· · —	
	c. Other. Spe	-		·	0.00
	l. Other. Spe		17d.	\$	0.00
		of alimony, maintenance, and support that you did n your pay on line 5, Schedule I, Your Income (Official		\$	0.00
		s you make to support others who do not live with yo	000. <i>j</i> .	\$	0.00
	ecify:	s you make to support others who do not live with yo	u. 19.	Ψ	0.00
	,	erty expenses not included in lines 4 or 5 of this form		our Income	
		s on other property	20a.		0.00
	. Real estat		20b.	· · —	0.00
		nomeowner's, or renter's insurance	20c.	·	0.00
			20d. 20d.	·	
		nce, repair, and upkeep expenses		·	0.00
		er's association or condominium dues	20e.		0.00
1. O th	ner: Specify:	Pet expenses	21.	+\$	300.00
2. Cal	culate vour	monthly expenses			
	a. Add lines 4	• •		\$	6,675.00
		2 (monthly expenses for Debtor 2), if any, from Official Fo	orm 106.J-2	\$	0,010.00
			/iii 1000-Z	·	0.075.00
220	. Add line 22	a and 22b. The result is your monthly expenses.		\$	6,675.00
3. Cal	culate your	monthly net income.			
	-	12 (your combined monthly income) from Schedule I.	23a.	\$	10,140.00
		monthly expenses from line 22c above.	23b.		6,675.00
_50	, , 5001		200.		3,070.00
230	. Subtract v	our monthly expenses from your monthly income.		1.	
_50		is your monthly net income.	23c.	\$	3,465.00
		an increase or decrease in your expenses within the			or docrosso bossues of a
		ou expect to finish paying for your car loan within the year or do y terms of your mortgage?	ou expect your mortgage	payment to increase	or decrease decause of a
		tomo or your mongage:			
		[=			
	Yes.	Explain here:			

Fill in th	is information to identify y	our occu			
Debtor 1	Regina Kapro First Name	Middle Name	Last Name		
Debtor 2		made rame	Zaot Hamo		
(Spouse if,	filing) First Name	Middle Name	Last Name		
United S	states Bankruptcy Court for th	ne: EASTERN DISTRICT	OF NEW YORK		
Case nu	mber				
(if known)					Check if this is an amended filing
Officia	I Form 106Dec				
Decl	aration Abou	t an Individua	I Debtor's Sci	hedules	12/15
If two ma	arried people are filing toge	ether, both are equally resp	onsible for supplying corre	ect information.	
You mus	t file this form whenever w	ou file hankruntev schedule	as or amonded schedules	Making a false statement, cond	ealing property or
				fines up to \$250,000, or impris	
years, or	both. 18 U.S.C. §§ 152, 134	41, 1519, and 3571.			
	Sign Below				
Did	l you pay or agree to pay so	omeone who is NOT an atto	orney to help you fill out ba	ankruptcy forms?	
_	No				
П	Yes. Name of person			Attach Bankruptcy Petit	ion Preparer's Notice
Ш				Declaration, and Signat	
	ler penalty of perjury, I dec they are true and correct.	lare that I have read the sui	mmary and schedules filed	with this declaration and	
	•				
X ₋	/s/ Regina Kaprolova		X X	2 sh ta m O	
	Regina Kaprolova Signature of Debtor 1		Signature of D	Jedtor 2	
	Date August 6, 2024		Date		

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and can umber (if known). Answer every question. Pert1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 1 Dettor 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business eduring this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.	in this informa	nation to identify your	2222			
Debtor 2 (Spouse 8, filing) Debtor 2 (Spouse 8, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Case number (If known) Check if this is ar amended filing Official Form 107 Statement of Financial Affairs for Individuals Filling for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and ca number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married Not married Not married Debtor 1: Dates Debtor 1 Ived there Debtor 2 Prior Address: Dates Debtor 1 Ves. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 Ived there Debtor 2 Prior Address: Dates Debtor 1 Ves. List all of the places, california, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a businesse, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.						
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Case number (It Intown) Check if this is an amended filing		First Name	Middle Name	Last Name		
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Pettor 1: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 1 lived there Debtor 2 Prior Address: Dates Debtor 1 States and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.	_	ried				
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4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.	_	ke sure you fill out <i>Sche</i>	edule H: Your Codebtors (O	fficial Form 106H).		
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.	t 2 Explain	n the Sources of Your	Income			
■ No □ Yes. Fill in the details.	Fill in the total a If you are filing No	I amount of income you g a joint case and you h	received from all jobs and	all businesses, including part	-time activities.	lendar years?
Debtor 1 Debtor 2		1	Debtor 1		Debtor 2	
Check all that apply. (before deductions and Check all that apply. (before deductions and				(before deductions and		Gross income (before deductions and exclusions)

Case number (if known)

Regina Kaprolova

Debtor 1

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

Describe what you contributed

Value

Dates you

contributed

more than \$600

Charity's Name

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total

Address (Number, Street, City, State and ZIP Code)

Pai	List of Certain Financial Accounts, I	nstrun	nents, Safe Depos	it Boxes, and St	orage	e Unit	s		
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market,	or oth	ner financial accou	ınts; certificates	of de				, ,
	houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		st 4 digits of count number	Type of account instrument	int oi	r	Date account was closed, sold, moved, or transferred		Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year	before you filed fo	r bankruptcy, ar	ıy saf	fe dep	oosit box or other depo	sitoı	ry for securities,
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		Des	cribe	the contents		Do you still have it?
22.	Have you stored property in a storage unit	or pla	ace other than you	r home within 1	year	befor	e you filed for bankrup	tcy?	
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, State and ZIP Code)		Des	cribe	the contents		Do you still have it?
Pa	t 9: Identify Property You Hold or Control	ol for S	Someone Else						
23.	Do you hold or control any property that s for someone.	omeo	ne else owns? Inc	lude any propert	y you	u borr	owed from, are storing	for,	or hold in trust
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City, Code)		Des	cribe	the property		Value
Pai	t 10: Give Details About Environmental In	forma	tion						
For	the purpose of Part 10, the following defini	tions a	apply:						
	Environmental law means any federal, state toxic substances, wastes, or material into regulations controlling the cleanup of these	the ai	r, land, soil, surfac	e water, ground	• •		•		
	Site means any location, facility, or proper to own, operate, or utilize it, including disp	-		environmental l	aw, w	vheth	er you now own, opera	te, o	r utilize it or used
	Hazardous material means anything an en hazardous material, pollutant, contaminan			as a hazardous	wast	te, ha	zardous substance, tox	ic s	ubstance,
Rep	ort all notices, releases, and proceedings t	hat yo	u know about, reg	ardless of when	they	occu	ırred.		
24.	Has any governmental unit notified you the	at you	may be liable or p	otentially liable	unde	er or i	n violation of an enviro	nme	ntal law?
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)		Governmental un Address (Number,			Enviro know	onmental law, if you it		Date of notice

Del	otor 1 Regina Kaprolova		Case number (if known)					
	<u>.</u>							
25.	Have you notified any governmental unit of							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or add	ministrative proceeding under any envir	onmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pai	t 11: Give Details About Your Business or	Connections to Any Business						
27.	Within 4 years before you filed for bankrup	tcy, did you own a business or have any	of the following connections to an	y business?				
	<u> </u>	in a trade, profession, or other activity, e						
	☐ A member of a limited liability comp	pany (LLC) or limited liability partnership	(LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	■ No. None of the above applies. Go to Part 12.							
		I in the details below for each business.						
	Business Name	Describe the nature of the business	er					
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security	number or ITIN.				
			Dates business existed					
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement to	anyone about your business? Incl	ude all financial				
	No No							
	Yes. Fill in the details below.	Data Jasuari						
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued						
Pai	t 12: Sign Below							
are with 18 U	ve read the answers on this Statement of Find true and correct. I understand that making a har bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571. Regina Kaprolova	false statement, concealing property, o	r obtaining money or property by fr					
Re	gina Kaprolova	Signature of Debtor 2						
Sig	nature of Debtor 1							
Dat	e August 6, 2024	Date						
	you attach additional pages to Your Stateme	ent of Financial Affairs for Individuals Fi	iling for Bankruptcy (Official Form 1	07)?				
	you pay or agree to pay someone who is no	t an attorney to help you fill out bankrup	otcy forms?					
	lo		•					
	es. Name of Person Attach the Bankru	uptcy Petition Preparer's Notice, Declaration nent of Financial Affairs for Individuals Filing		200				
OTTIC	ial Form 107 Statem	ient of cinancial Analis for individuals filing t	ioi balikiupicy	page				

Debtor 1 Regina Kaprolova

Case number (if known)

Fill in this information to identify your case:	
Debtor 1 Regina Kaprolova	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: Eastern District of New York	
Case number(if known)	☐ Check if this is an amended filing

Official Form 122B

Chapter 11 Statement of Your Current Monthly Income

12/21

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11 (other than Subchapter V). If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1:	Calculate	Your C	urrent	Monthly	Income

1. What is your marital and filing status? Check one only.	

■ Not married. Fill out Column A, lines 2-11.

 \square Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

☐ Married and your spouse is NOT filing with you. Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

you have nothing to report for any lin	e, write 50 in the 5p	ace.			
			Column Debtor		Column B Debtor 2
2. Your gross wages, salary, tips, payroll deductions).	bonuses, overtime	, and commissions (be	fore all \$	0.00	\$
 Alimony and maintenance paym Column B is filled in. 	nents. Do not includ	e payments from a spou	se if \$	0.00	\$
 All amounts from any source will of you or your dependents, include from an unmarried partner, member and roommates. Include regular or filled in. Do not include payments 	uding child suppor ers of your househo ontributions from a s	t. Include regular contrillld, your dependents, pa	outions ents,	0.00	\$
5. Net income from operating a business, profession, or farm	Debtor 1	Debtor 2			
Gross receipts (before all deduction	ons)	\$0.00_			
Ordinary and necessary operating	expenses	-\$ <u>0.00</u>			
Net monthly income from a busine	ess, profession, or fa	rm \$0.00 Copy	here -> \$	0.00	\$
6. Net income from rental and other real property	Debtor 1	Debtor 2			
Gross receipts (before all deduction	ons)	\$			
		0.00			
Ordinary and necessary operating	•	-\$ 0.00	L	0.00	•
Net monthly income from rental or	other real property		here -> \$	0.00	\$

Case number (if known)

			Column Debtor		Column B Debtor 2
7.	Interest, dividends, and royalties		\$	0.00	\$
8.	Unemployment compensation		\$	0.00	\$
	Do not enter the amount if you contend that the amount received was a benefit the Social Security Act. Instead, list it here:	undei	r		
	For you\$)_			
	For your spouse \$				
	Pension or retirement income. Do not include any amount received that was benefit under the Social Security Act. Also, except as stated in the next sentend not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury disability, or death of a member of the uniformed services. If you received any repay paid under chapter 61 of title 10, then include that pay only to the extent the does not exceed the amount of retired pay to which you would otherwise be entifered under any provision of title 10 other than chapter 61 of that title. Income from all other sources not listed above. Specify the source and among Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international of domestic terrorism; or compensation, pension, pay, annuity, or allowance paid United States Government in connection with a disability, combat-related injury disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.	e, do or etired it it itled unt. r by the	\$	0.00	\$
			\$		\$
		_	\$	0.00	\$
	Total amounts from separate pages, if any.	+	\$	0.00	\$
11	. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	.	0.00	D +\$ _	= \$

Debtor 1 Regina Kaprolova Case number (if known)

Part 2: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Regina Kaprolova

Regina Kaprolova Signature of Debtor 1

Date **August 6, 2024**

MM / DD / YYYY

United States Bankruptcy Court Eastern District of New York

In r	e Regina Kaprolova		Case No.		
		Debtor(s)	Chapter	11	
	DISCLOSURE OF COMPENS	ATION OF ATTOI	RNEY FOR DI	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	f the petition in bankruptcy,	or agreed to be paid	to me, for services	
	For legal services, I have agreed to accept		\$	15,000.00	
	Prior to the filing of this statement I have received		\$	15,000.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compensation	ation with any other person	unless they are mem	bers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				law firm. A
5.	In return for the above-disclosed fee, I have agreed to rende	r legal service for all aspect	s of the bankruptcy of	case, including:	
	a. Analysis of the debtor's financial situation, and renderingb. Preparation and filing of any petition, schedules, statemec. Representation of the debtor at the meeting of creditors ad. [Other provisions as needed]	ent of affairs and plan which	may be required;	-	nkruptcy;
6.	By agreement with the debtor(s), the above-disclosed fee do	es not include the following	g service:		
	(CERTIFICATION			
this	I certify that the foregoing is a complete statement of any agbankruptcy proceeding.		payment to me for r	epresentation of the	debtor(s) in
	August 6, 2024	/s/ Alla Kachan			
	Date	Alla Kachan 4244			
		Signature of Attorne Law Offices Of A			
		2799 Coney Islan			
		Suite 202 Brooklyn, NY 112	25		
			ax: (347) 342-315	6	
		àlla@kachanlaw.			
		Name of law firm			

United States Bankruptcy Court Eastern District of New York

In re	Regina Kaprolova	Case No.		
		Debtor(s)	Chapter	11

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Alla Kachan 4244281 Law Offices Of Alla Kachan, P.C. 2799 Coney Island Avenue Suite 202 Brooklyn, NY 11235 (718) 513-3145 Fax: (347) 342-3156

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ALLEN PHILIP SRAGOW 1360 Dickerson Road Teaneck, NJ 07666

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One/SaksFirst Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chase Mortgage Attn: Legal Correspondence Center 700 Kansas Ln Mail Code La4-7200 Monroe, LA 71203

Comenity Capital/Sephora Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Comenity/Century 21 Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Dsnb Bloomingdales Attn: Bankruptcy Po Box 8053 Mason, OH 45040 Lexus Financial Services P.O. Box 8026 Cedar Rapids, IA 52408-8026

Moysha Burekhovitch 1543 E17th Brooklyn, NY 11230

Syncb/Care Credit Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/PC Richard Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/TJX Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/TJX Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

TD Bank, N.A. Attn: Bankruptcy 1701 Rt 70 East Cherry Hill, NJ 08003

Toyota Motor Credit

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

DEBTOR(S):	Regina Kaprolova	CASE NO.:.
		(b), the debtor (or any other petitioner) hereby makes the following disclosure lowledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before thes; (iii) are affiliates, as defined or more of its general partners;	purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case ne filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a (vi) are partnerships which share one or more common general partners; or (vii) ither of the Related Cases had, an interest in property that was or is included in the]
NO RELATED	CASE IS PENDING OR HAS B	BEEN PENDING AT ANY TIME.
☐ THE FOLLOWI	ING RELATED CASE(S) IS PE	ENDING OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:
CURRENT STATE	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (I	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	OING (Y/N):	[If closed] Date of closing:
CURRENT STATE	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED (I	Refer to NOTE above):
	LISTED IN DEBTOR'S SCHE F RELATED CASE:	DULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT	T/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:

8/06/24 4:46PM DISCLOSURE OF RELATED CASES (cont'd) CURRENT STATUS OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.) MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE: NOTE: Pursuant to 11 U.S.C. § 109(g), certain individuals who have had prior cases dismissed within the preceding 180 days may not be eligible to be debtors. Such an individual will be required to file a statement in support of his/her eligibility to file. TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY, AS APPLICABLE: I am admitted to practice in the Eastern District of New York (Y/N): Y CERTIFICATION (to be signed by pro se debtor/petitioner or debtor/petitioner's attorney, as applicable): I certify under penalty of perjury that the within bankruptcy case is not related to any case now pending or pending at any time, except as indicated elsewhere on this form. /s/ Alla Kachan Alla Kachan 4244281 Signature of Debtor's Attorney

Law Offices Of Alla Kachan, P.C. 2799 Coney Island Avenue Suite 202 Brooklyn, NY 11235 (718) 513-3145 Fax:(347) 342-3156 Signature of Pro Se Debtor/Petitioner

Signature of Pro Se Joint Debtor/Petitioner

Mailing Address of Debtor/Petitioner

City, State, Zip Code

Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009